STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Life Technolo	gies Corporation Employees Po	olitical Action Committee		
ADDRESS (number and	street) 1050 K Street NW,	Suite 310 		
(Check if address is changed)				
	Washington		DC	
		CITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	Invitrogen_PAC@r	nyfecnotices.com		
COMMITTEE'S WER	PAGE ADDRESS (URL)			
(Check if addres				
is changed)				
2. DATE 0 3				
3. FEC IDENTIFICA	TION NUMBER	C C00404442		
4. IS THIS STATEM	NEW (N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the best of my k	nowledge and belief it is true, correc	t and complete	
•	Treasurer David H. Smith	-	·	
Type or Print Name of	Treasurer			
Signature of Treasure	Electronically Filed by David H .	Smith	Date 03	26 Y Y 2009
NOTE: Submission of fa	lse, erroneous, or incomplete information n	nay subject the person signing this S	•	-
Office Use Only		For further informatic Federal Election Common Toll Free 800-424-953	mission	FEC FORM 1 (Revised 02/2009)